

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

ADDRESS (number and street)

4245 N. Fairfax Drive

Suite 750

☐ Check if different than previously reported. (ACC)

Arlington

VA

22203

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00333104

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
11 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
11 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brian H. Graff

Signature of Treasurer

Brian H. Graff

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
12 11 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 01 / 2013 To: M M / D D / Y Y Y Y Y 11 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2013		<span style="border: 1px solid black; padding: 2px;">113911.87</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">118058.18</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2152.00</span>	<span style="border: 1px solid black; padding: 2px;">142005.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">120210.18</span>	<span style="border: 1px solid black; padding: 2px;">255916.87</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">15605.21</span>	<span style="border: 1px solid black; padding: 2px;">151311.90</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">104604.97</span>	<span style="border: 1px solid black; padding: 2px;">104604.97</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2013			

To:

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2013			

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2150.00

125154.00

(ii) Unitemized .....

2.00

10551.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2152.00

135705.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

1300.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

2152.00

137005.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2152.00

142005.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

2152.00

142005.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	505.21	4476.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	505.21	4476.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	146035.86
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	100.00	800.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15605.21	151311.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15605.21	151311.90

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2152.00	137005.00
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2052.00	136205.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	505.21	4476.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	505.21	4476.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. Pam Johnson**

Mailing Address 2141 E Highland Ave Ste 180

City State Zip Code  
 Phoenix AZ 85016-4715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Pension Strategies, LLC

Occupation  
 CONSULTANT/ PLAN DESIGN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 13 / 2013

Transaction ID : C2510481

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Barbara B Leadem**

Mailing Address 120 W Street Road

City State Zip Code  
 Glen Mills PA 19342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Atlantic Pension Services, Inc

Occupation  
 Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 21 / 2013

Transaction ID : C2510483

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Miriam G Matrangola**

Mailing Address 120 W Street Road

City State Zip Code  
 Kennett Square PA 19348-1614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Atlantic Pension Services, Inc

Occupation  
 Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 21 / 2013

Transaction ID : C2510482

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

<p>Full Name (Last, First, Middle Initial)</p> <p><b>A. James J McKinney</b></p> <p>Mailing Address 3736 Executive Center Dr Fl 2</p> <p>City State Zip Code  Augusta GA 30907-2360</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation  Retirement Strategies Incorpor VICE PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <input type="text" value="2500.00"/></p>		<p>Date of Receipt</p> <p><input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2013"/></p> <p><b>Transaction ID : C2510478</b></p> <p>Amount of Each Receipt this Period  <input type="text" value="1250.00"/></p>
<p>Full Name (Last, First, Middle Initial)</p> <p><b>B. David M Wertz</b></p> <p>Mailing Address 2020 East 70th Street</p> <p>City State Zip Code  Shreveport LA 71105</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation  Wertz &amp; Associates, Inc. OTHER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <input type="text" value="500.00"/></p>		<p>Date of Receipt</p> <p><input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2013"/></p> <p><b>Transaction ID : C2510477</b></p> <p>Amount of Each Receipt this Period  <input type="text" value="500.00"/></p>
<p>Full Name (Last, First, Middle Initial)</p> <p><b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <input type="text"/></p>		<p>Date of Receipt</p> <p><input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount of Each Receipt this Period  <input type="text"/></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<input type="text" value="1750.00"/>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<input type="text" value="2150.00"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 14

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. American Express**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		0	5		2	0	1	3		

Mailing Address Post Office Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Transaction ID : D150863

Purpose of Disbursement  
Account expenses

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

3	0	6	.	9	6
---	---	---	---	---	---

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		1	2		2	0	1	3		

Mailing Address Post Office Box 85024

City	State	Zip Code
Richmond	VA	23285-5024

Transaction ID : D150864

Purpose of Disbursement  
Account expenses

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

2	0	.	5	0
---	---	---	---	---

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		1	2		2	0	1	3		

Mailing Address Post Office Box 85024

City	State	Zip Code
Richmond	VA	23285-5024

Transaction ID : D150865

Purpose of Disbursement  
Account expenses

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

5	7	.	5	2
---	---	---	---	---

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3	8	4	.	9	8
---	---	---	---	---	---



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. Committee for the Preservation of Capitalizam (CPC), The**

Mailing Address Post Office Box 65314

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2013

Transaction ID : D150860

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO STRENGTHEN AMERICA**

Mailing Address 356 MORRIS STREET

City	State	Zip Code
WOODBURY	NJ	08096

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : D150858

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. SCHOCK FOR CONGRESS**

Mailing Address PO BOX 10555

City	State	Zip Code
PEORIA	IL	61612

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Rep. Aaron Schock

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 18

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2013

Transaction ID : D150854

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8500.00
---------

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. DEVIN NUNES CAMPAIGN COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2013

Mailing Address PO BOX 6545

City	State	Zip Code
VISALIA	CA	93290

Transaction ID : D150859

Purpose of Disbursement  
Candidate Contribution

Amount of Each Disbursement this Period

Candidate Name

Rep. Devin Nunes

Category/  
Type

1000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 21

Full Name (Last, First, Middle Initial)

**B. JIM RENACCI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2013

Mailing Address 150 SMOKERISE DRIVE

City	State	Zip Code
WADSWORTH	OH	44281

Transaction ID : D150856

Purpose of Disbursement  
Candidate Contribution

Amount of Each Disbursement this Period

Candidate Name

Rep. James B. Renacci

Category/  
Type

1000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OH District: 16

Full Name (Last, First, Middle Initial)

**C. TIBERI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2013

Mailing Address 2931 E DUBLIN GRANVILLE ROAD

City	State	Zip Code
COLUMBUS	OH	43231

Transaction ID : D150857

Purpose of Disbursement  
Candidate Contribution

Amount of Each Disbursement this Period

Candidate Name

Rep. Pat Tiberi

Category/  
Type

1000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OH District: 12

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. RUSH HOLT FOR CONGRESS**

Mailing Address PO Box 782

City	State	Zip Code
Pennington	NJ	08534-0782

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Rep. Rush D. Holt

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2013

Transaction ID : D150855

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ENZI FOR US SENATE**

Mailing Address PO BOX 2775

City	State	Zip Code
CODY	WY	82414

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Sen. Michael B. Enzi

Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : D150862

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3500.00
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15000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The American Society of Pension Professionals and Actuaries Political Action Committee (ASPPA-NAPA PAC)

Full Name (Last, First, Middle Initial)

**A. Acuff & Associates, Inc.**Mailing Address 210 Westwood Pl  
Ste 100

City Brentwood State TN Zip Code 37027-7554

Purpose of Disbursement  
Refund for individual contribution of Terry W. Dunger on 10/28/2013 made on  
his company card  
Candidate Name

010

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		26		2013

Transaction ID : D150861

Amount of Each Disbursement this Period

100.00
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Contribution refund

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00
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100.00
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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB28A

Transaction ID : D150861

This is a refund for an individual contribution from Terry Dunger (Trans. ID: C2495985) made on 10/28/2013 on his company credit card.

Form/Schedule:

Transaction ID: